Under the Paperwork Reduction And of 1895, his persons are regulated to respond to a collection of known unless in displays a yello Chill configuration number. Substitute for Form PTO-876 Applied from or Dooker Humber APPLICATION AS FILED - PARTI (Column 1) (Column 2) OTHER THAN SMALL ELITTY OR. FOR EMALL ENTITY NUMBER FILED BASIQ FEE (17 OFR 1.16(4).(b); 01(0)) HUMBER EXTRA RATE (\$) FEE (\$) · N/A SEARCH FEE 137 OFF 7.16(K), (D), or (my) HVA FEE (\$) ·. N/A N/A MA EXAMINATION FEE (8) OFR (.16(0), (P), or (Q) fl/A NA N/A N/A H/A TOTAL CLAIMS BY CFR 1.16(1)) ŃΑ NA mknus 20 = MOEPENDENT GLAIMS 26 (37 OFR 1.16(N)) OR 50 minus.s. If the specification and drawings exceed 100 x 105 = APPLICATION BIZE 200 sheels of paper, the application size fee due Is \$260 (\$130 for small entity) for each (37 CFR 1.16(s)) additional 50 sheets of fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1:16(s). MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(0)) 185 \* It the difference in column 1 is less than zero, enter \*0\* in column 2. 370 TOTAL PPLICATION AS AMENDED - PART II TOTAL (Column 1) (Column 2) (Column 3) CLAIMS OTHER THAN SMALL ENTITY OR HIGHEST HIGHEST REMAINING PRESENT AFTER PREVIOUSLY RATE (\$) ADDI-TIONAL **HENDMENT** RATE (\$) cr cfr 1.16m PAID FOR ADDI-Minus TIONAL FEE (\$) FEE (\$) Andependent OFR 1,16(N) 25 Minus 6 ÖR 50 Application Size Fee (37 CFR 1.16(s)) 105 210 = OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.160) (8,5 3.40 OR: TOTAL ADD'L FEE TOTAL ADD'L FEE OR (Column 1) (Column 2) (Columni 3) CLAIMS HIGHEST œ REMAINING NUMBER PRESENT EXTRA AFTER AMENDMENT PREVIOUSLY PAID FOR RATÉ (\$) ADDI-TIONAL FEE (1) ADDI-TIONAL FEE (\$) RATE (\$) Total CT OFR 1.1500 Minus <u>ō</u> tratependent Minus x 50. OR Application 81ze Fee (37 CFR-1.16(5)) 10.5 x: 210 EMBLY BY CALL LIANCE DESCRIPTION OF WALTHER D 3 ! Kine they in column is less than the entry in column 2, while to his column 3.

"If the Highest Number Previously Paid For the THIS SPACE is less than 20, enter 20.

The Highest Number Previously Paid For the THIS SPACE is less than 3, enter 3.

This collection of Information is required by 37 CFR 1.16. The Information is required to obtain or retain a benefit by the public which is to file (and by the including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Commence, P.O. Box 1450, Alexandria, VA 22313-1450, DO NOT SEND FREES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Palents, P.O. Box 1450, Alexandria, VA 22313-1450. TOTAL ADD'L FEE

ll you need assistance in completting the form, ball 1-800-PTO-8168 and select option 2